

The Commonwealth of Massachuselts Department of the State Treasurer One Ashburton Place Boston, Massachusetts 02108-1608

Please be certain to:

- Complete, sign, and date the attached application.
- Enclose a copy of your member #4 DD214 (service discharge papers) for service after Septermber
- Have the residence certificate portion of the application signed and stamped by the appropriate official in the city or town you lived prior to your latest enlistment/commission into the service (if minor at the time of entry, please have a parent's residency certified). Residency must reflect at least 6 months prior to your latest enlistment/commission into the military but no more than 1 year.
- Enclose completed W9 form.
- If deployed to Iraq/Afghanistan, enclose copies of orders.
- If you are in the Guard or the Reserves please submit your orders sending you to active duty. You must be activated under Title 10 not Title 32.
- Contact my office at 617-367-3900 ext. 859 with any questions.
- Mail complete application to:

Office of the State Treasurer One Ashburton Place, Room 1207 Boston, MA 02108

Attention: Welcome Home Bonus Division

Thank you for your service to our country.

Sincerely,

Timothy P. Cahill Treasurer and Receiver General Veteran's Bonus Division 617-367-3900 ext. 859

Welcome Home Bonus Information

Eligibility Requirements:

- 1. Chapter 130 Acts of 2005: Six months domicile in Massachusetts immediately prior to your latest enlistment/commission into the Armed Forces.
- 2. Active service on or after September 11, 2001.

Payment Information:

1. Active service in Afghanistan or Iraq:

\$1000.00

- * The area of eligibility encompasses all land area of the countries Iraq and Afghanistan, and the contiguous water area out to 12 nautical miles, and all air spaces above the land area of Iraq and Afghanistan and above the contiguous water area out to 12 nautical miles.
- 2. Six months or more active service, state side or outside the continental limits of the United States service: \$500.00
- * Active service shall not include active duty for training in the Army National Guard or Air National Guard, or active duty for training as a reservist in the armed forces of the United States. You also must be activated under Title 10 not Title 32

How to Apply:

- 1. Complete, date, and sign the application.
- 2. The Residence Certificate portion of the application must be signed and stamped by the appropriate official in the city or town where you resided prior to your latest enlistment/commission into the Armed Forces. Residency certificate must reflect at least 6 months prior to your latest enlistment/commission date into the militarty, but no more than 1 year. (See page one of this application for more specific details regarding the Residency certificate.)
- 3. Submit certificate to be filled out by Commanding Officer.
- 4. Submit a copy of Military I.D.
- 5. Submit copy of orders if deployed to Iraq/Afghanistan.
- 6. If you are still active in the Guard or the Reserves please submit copy of orders to active duty. Orders to active duty must be under Title 10.



The Commonwealth of Massachusells Department of the State Treasurer One Ashburton Place Boston, Massachuselts 02108-1608

Application for the Welcome Home Bonus under Chapter 130, Acts of 2005

1.	Name under which veteran entered the service			
2	D (21 (C 1 (C)	Last	First	Middle
2.	Present Name (if different)Last		First	Middle
3.	Mailing address (present)Street		City/Town	State/Zip Code
4.	Gender: Male Female	5 Social S	•	•
6.	Branch of service		•	
8.	Enlisted			
9.	Active service began:	Place:		
10.	Dates of active service outside the continental limits of the United States, Alaska, or Hawaii	From	То	
11.	Date of discharge or release from active service	eDate		
12.	Place of birth	13. Date of	f birth	
14.	Legal residence at time of entry into the service			
15.	Street Address given at time of separation from the ser		City/Town	State/Zip Code
	Street		City/Town	State/Zip Code
16.	Length of Legal Residence in Massachusetts IM	MMEDIATEL	Y PRIOR TO ENTRY II	
17.	Names and legal address of parents at time of en	ntry into the se	ervice	Yrs/ Months
18.	If married at time of entry into the service, name	e and legal add	dress of spouse	
	Penalty Provisions, Sec. 16 & 17, Ch. 130, Act written, relating to material fact supporting a cof not more than one thousand dollars, or by it	claim under th	he provisions of this act,	shall be punished by a fine
	Date Applic	cant's Signature	Ar	oplicant's Phone Number

RESIDENCE CERTIFICATE should be completed by city/town official

Today's Date	City/Town
(a) I hereby certify that, according to the official re-	ecords of this officeName
was a resident of	in the Commonwealth of
Massachusetts on January first of the year	the veteran's entry into the armed forces of
the United States in the course of the Welcome Ho	me Bonus.
Signature of Official	Please print name and title of Official
Seal	
(b) If applicant was a MINOR, kindly certify in secon mother appearing on line 19.(c) I am unable to complete the above certificate st	. ,
Signature of Official	Please print name and title of Official

DISCHARGE PAPERS (DD214) MUST BE ATTACHED HERETO

MASSACHUSETTS WELCOME HOME BONUS APPLICATION FOR OFFICERS OR ENLISTED SERVICEMEN WHO HAVE SERVED IN IRAQ/AFGHANISTAN AFTER SEPTEMBER 11, 2001.

CERTIFICATE TO BE FILLED OUT BY COMMANDING OFFICER

I HEREBY CERTIFY, UNDER THE PENALTIES OF PERJURY, THAT ACCORDING TO THE OFFICIAL MILITARY RECORDS IN MY CUSTODY, THE FOLLOWING STATEMENTS ARE TRUE.

d) Social Security Number e) Component and Branch or Class	a)	Name of applicant _			
Street City/Town State/Zip Code	,	Last		First	Middle
Street City/Town State/Zip Code	b)	Present permanent home address			
d) Social Security Number e) Component and Branch or Class				•	State/Zip Code
d) Social Security Number e) Component and Branch or Class	c)	Present mailing address	Street	City/Town	State/Zip Code
g) Character of Service Honorable is pending by or under sentence of a court martial? Yes No h) Length of Active Service					·
h) Length of Active Service	e)	Component and Branch or Class		f) Present Rate/Rank	
i) Ship or Organization of Foreign Duty Has veteran received an award for serving overseas? Overseas Campaign Badges, etc. j) Date of Birth	g)	Character of Service ☐ Honoral	ole □ is pending by o	or under sentence of a court	martial? □ Yes □ No
Overseas Campaign Badges, etc	h)	Length of Active Service year	s months	days From	Topresent dates
Date of entry into present continuous active service Permanent home address then	i)	Ship or Organization of Foreign I Has veteran received an award for Overseas Campaign Badges, etc.	Outyor serving overseas?_		
Permanent home address then	j)	Date of Birth	k) Place	1)	□ Male □ Female
Means of Entry Induction Enlistment Commissioned Recall Other Place of Entry n) Date of first enlistment or appointment From To Permanent address then Street City/Town State/Zip Commissioned Recall Other Osubsequent enlistments or periods of active service From To Permanent address then Street City/Town State/Zip Code I declare under the pains and penalties of perjury, that according to official military records in my custody, the application who is presently under my command, has served within the land area of the countries of Iraq/Afghanistan; or has served within the air space above the contiguous water area within 12 nautical miles of the country of Iraq. Furthermore, according to the official military records in my custody, any such service within the land area of country of Afghanistan or in the air space above the country of Afghanistan or in the air space above the country of Afghanistan or in the land area of the country of Iraq or the contiguous waters within 12 nautical miles for the country of the air space above these areas occurred on or after March 19, 2003. According to the official records in custody, the character of service in any of the aforementioned areas was honorable. Commanding Officer Signature Commanding Officer Rank	m)	Date of entry into present contin Permanent home address then	uous active service_	City/Town	
Permanent address then Street City/Town State/Zip Cod Means of entry Induction Enlistment Commissioned Recall Other O) Subsequent enlistments or periods of active service From To Permanent address then Street City/Town State/Zip Code I declare under the pains and penalties of perjury, that according to official military records in my custody, the applic who is presently under my command, has served within the land area of the countries of Iraq/Afghanistan; or has se in the contiguous water area within 12 nautical miles of the country of Iraq; or has served within the air spaces above land areas of the countries of Iraq/Afghanistan; or has served within the air space above the contiguous water area will nautical miles of the country of Iraq. Furthermore, according to the official military records in my custody, any such service within the land area of country of Afghanistan or in the air space above the country of Afghanistan occurred on or after October 24, 2001; or such service in the land area of the country of Iraq or the contiguous waters within 12 nautical miles for the countrary or the air space above these areas occurred on or after March 19, 2003. According to the official records in custody, the character of service in any of the aforementioned areas was honorable. Commanding Officer Signature Commanding Officer Signature Commanding Officer Signature		Means of Entry □ Induction	\Box Enlistment \Box	Commissioned Recal	
Means of entry Induction Enlistment Commissioned Recall Other Subsequent enlistments or periods of active service From	n)	Date of first enlistment or appoir Permanent address then	tment From	То	
Permanent address then Street City/Town State/Zip Code I declare under the pains and penalties of perjury, that according to official military records in my custody, the application who is presently under my command, has served within the land area of the countries of Iraq/Afghanistan; or has sein the contiguous water area within 12 nautical miles of the country of Iraq; or has served within the air spaces above land areas of the countries of Iraq/Afghanistan; or has served within the air space above the contiguous water area with 12 nautical miles of the country of Iraq. Furthermore, according to the official military records in my custody, any such service within the land area of country of Afghanistan or in the air space above the country of Afghanistan occurred on or after October 24, 2001; or such service in the land area of the country of Iraq or the contiguous waters within 12 nautical miles for the country Iraq or the air space above these areas occurred on or after March 19, 2003. According to the official records in custody, the character of service in any of the aforementioned areas was honorable. Commanding Officer Signature Commanding Officer Rank		Means of entry Induction	Street Enlistment	City/Town Commissioned Recal	State/Zip Code Other
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		country of Afghanistan or in the such service in the land area of Iraq or the air space above thes	air space above the co the country of Iraq or se areas occurred on	untry of Afghanistan occurre the contiguous waters withi or after March 19, 2003. Ac	d on or after October 24, 2001; or any n 12 nautical miles for the country of
Commanding Officer Print Name Commanding Officer Contact Numb	Cor	mmanding Officer Signature			Commanding Officer Rank
	Cor	mmanding Officer Print Name			Commanding Officer Contact Number

Date



Rev. May 2004

Request for Taxpayer Identification Number and Certification

Completed form should be given to the requesting department or the department you are currently doing business with.

Name (List legal name, if joint names, list first & circle the name of	the person whose TIN you enter in Part I-See Specific Instruction on page 2)
Business name, if different from above. (See Specific Instruction	n on page 2)
Check the appropriate box:	☐ Corporation ☐ Partnership ☐ Other ▶
Legal Address: number, street, and apt. or suite no.	Remittance Address : if different from legal address number, street, and apt. or suite no.
City, state and ZIP code	City, state and ZIP code
Phone # () Fax # ()	Email address:
Part I Taxpayer Identification Number (ΓΙΝ)
Enter your TIN in the appropriate box. For individuals, this is security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instruction page 2. For other entities, it is your employer identification not (EIN). If you do not have a number, see How to get a TIN on Note: If the account is in more than one name, see the chart for guidelines on whose number to enter.	n on umber page 2.
Part II Certification	
Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer	identification number (or I am waiting for a number to be issued to me), and
	m exempt from backup withholding, or (b) I have not been notified by the Internal thholding as a result of a failure to report all interest or dividends, or (c) the IRS has olding, and
3. I am an U.S. person (including an U.S. resident alien).	
the State Ethics Commission. Individual information, in Information.	ate employee: (check one): No Yes If yes, attach a copy of the letter from cluding address will be part of the public record and accessible under Freedom of
	ove if you have been notified by the IRS that you are currently subject to backup and dividends on your tax return. For real estate transactions, item 2 does not apply.
Sign Here Authorized Signature ▶	Date ►
A person who is required to file an information return with the IRS must get your correct withholding barter exchange taxpayer identification number (TIN) to report, for	This is called "backup withholding." and may be subject to backup include interest, dividends, broker and ange transactions, rents, royalties, the pay, and certain payments from 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

transactions, mortgage interest you paid, acquisition or debt, or contributions you made to

Use Form W-9 only if you are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify you are not subject to backup withholding

If you are a foreign person, use the appropriate Form W-8. See Pub 515, Withholding of Tax on Nonresident Aliens and Foreign Corporations.

What is backup withholding? Persons making certain payments to you must withhold a designated percentage, currently 29% and pay to the IRS of such payments under certain

fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester, or
- 2. You do not certify your TIN when required (see the Part II instructions on page 2 for details), or
- 3. The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends only), or

ertain payees and payments are exempt from backup withholding. See the Part II instructions on page 2.

Penalties

Failure to furnish TIN. If your fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful nealect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name. If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first and then circle the name of the person or entity whose number you enter in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Part I - Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate

If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your

If you are an LLC that is disregarded as an entity separate from its owner (see Limited liability company (LLC) above), and are owned by an individual, enter your SSN (or "pre-LLC" EIN, if desired). If the owner of a disregarded LLC is a corporation, partnership, etc., enter the owner's EIN.

Note: See the chart on this page for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office. Get Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can get Forms W-7 and SS-4 from the IRS by calling 1-800-TAX-FORM (1-800-829-3676) or from the IRS's Internet Web Site { HYPERLINK http://www.irs.gov }

If you do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments.

The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Part II - Certification

To establish to the paying agent that your TIN is correct or you are a U.S. person, or resident alien, sign Form W-9.

For a joint account, only the person whole TIN is shown in Part I should sign (when required).

Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to give your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold a designated percentage, currently 29% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also

What Name and Number to Give the Requester

	this type of account:	Give name and SSN of
1.	Individual	The individual
2.	Two or more	The actual owner of the
	individuals (joint	account or, if combined
	account)	funds, the first
	,	individual on the
		account 1
3.	Custodian account of	The minor ²
	a minor (Uniform Gift	
	to Minors Act)	
4.	a. The usual	The grantor-trustee 1
	revocable savings	The granter areas
	trust (grantor is	
	also trustee)	
	b. So-called trust	The actual owner 1
	account that is not	The deldal owner
	a legal or valid	
	trust under state	
	law	
5.	Sole proprietorship	The owner 3
٥.	Cole proprietoromp	THE OWNER
For	this type of account:	Give name and EIN of
6.	Sole proprietorship	The owner ³
	Sole proprietorship A valid trust, estate, or	
6. 7.	Sole proprietorship A valid trust, estate, or pension trust	The owner ³ Legal entity ⁴
6. 7. 8.	Sole proprietorship A valid trust, estate, or pension trust Corporate	The owner ³ Legal entity ⁴ The corporation
6. 7.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club,	The owner ³ Legal entity ⁴
6. 7. 8.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable,	The owner ³ Legal entity ⁴ The corporation
6. 7. 8.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other	The owner ³ Legal entity ⁴ The corporation
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization	The owner ³ Legal entity ⁴ The corporation The organization
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership	The owner ³ Legal entity ⁴ The corporation The organization The partnership
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered	The owner ³ Legal entity ⁴ The corporation The organization The partnership
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered nominee	The owner ³ Legal entity ⁴ The corporation The organization The partnership The broker or nominee
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered nominee Account with the	The owner ³ Legal entity ⁴ The corporation The organization The partnership
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6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered nominee Account with the Department of Agriculture in the name	The owner ³ Legal entity ⁴ The corporation The organization The partnership The broker or nominee
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered nominee Account with the Department of Agriculture in the name of a public entity (such	The owner ³ Legal entity ⁴ The corporation The organization The partnership The broker or nominee
6. 7. 8. 9.	Sole proprietorship A valid trust, estate, or pension trust Corporate Association, club, religious, charitable, educational, or other tax-exempt organization Partnership A broker or registered nominee Account with the Department of Agriculture in the name of a public entity (such as a state or local	The owner ³ Legal entity ⁴ The corporation The organization The partnership The broker or nominee
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number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

If you have questions on completing this form, please contact the Office of the State Comptroller. (617) 973-2311 or 973-2655

Upon completion of this form, please send it to the Commonwealth of Massachusetts Department you are doing business with.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name, but you may also enter your business or "DBA" name. You may use either your SSN or EIN (if you have one).

^{4.} List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)